# Family Advocacy Program & the Psychiatrist

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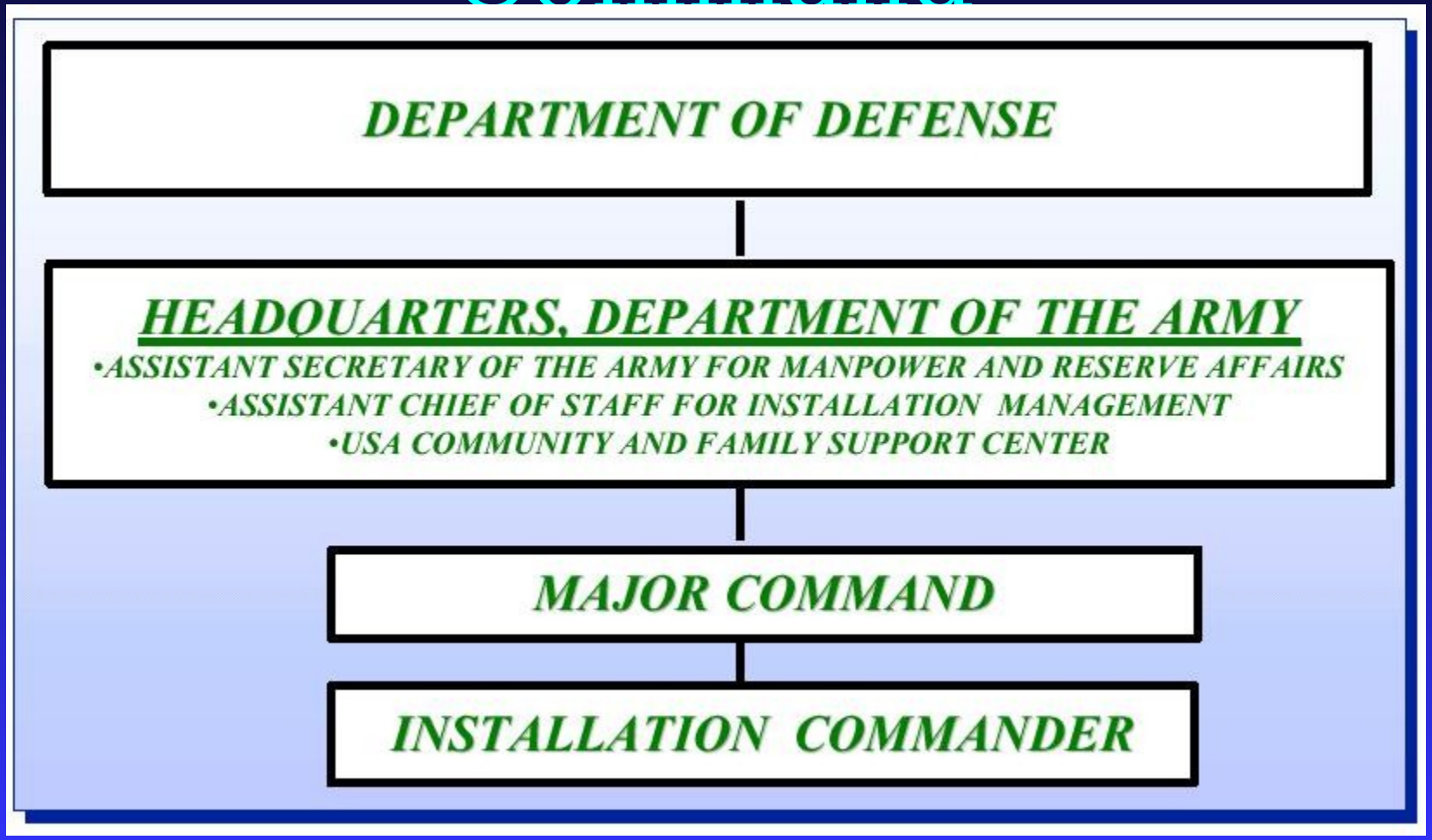
# Outline

- Introduction
- History
- Purpose
- Case Review Committee (CRC)
- Mental Health interface
- Psychiatry's role

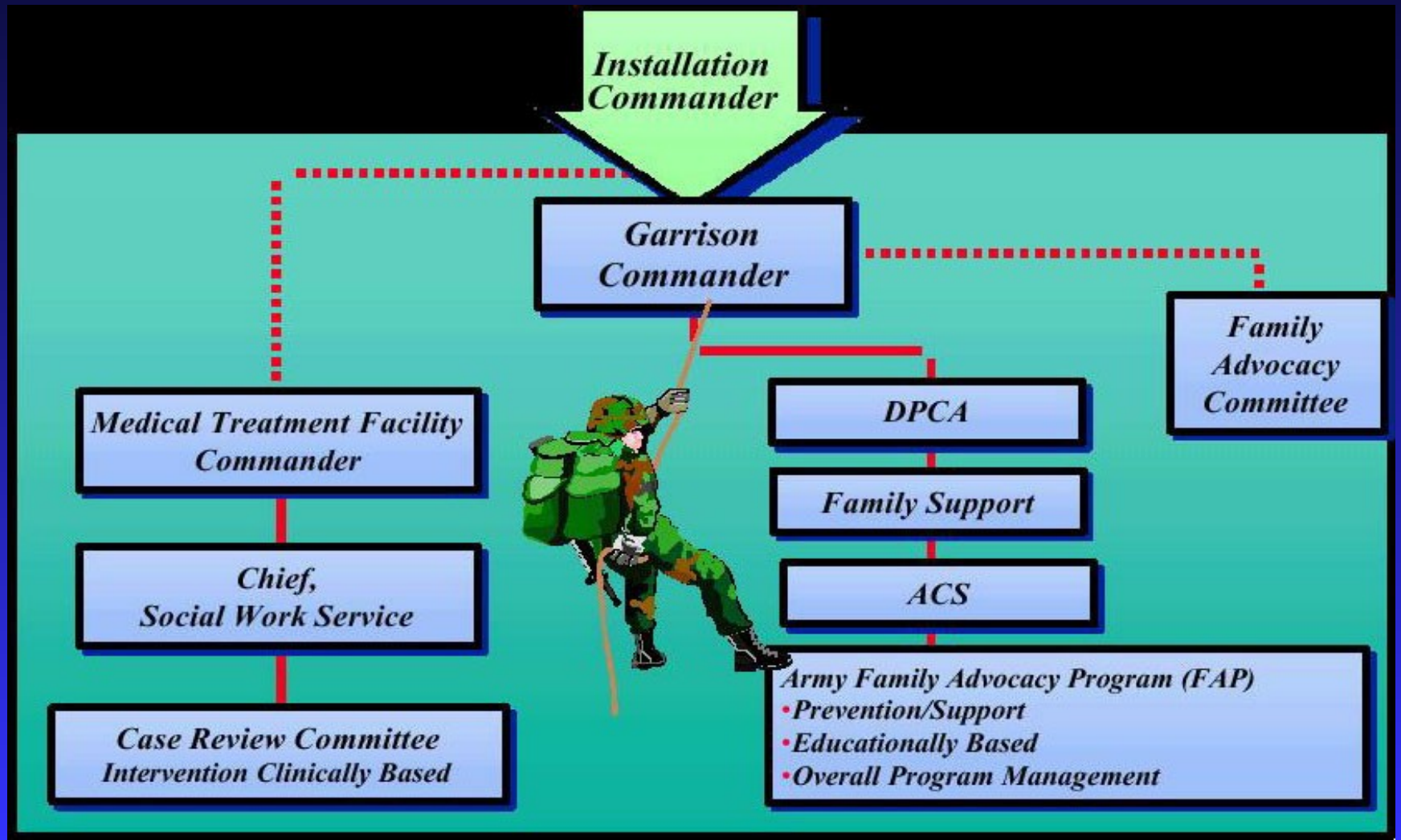
# History of Family Advocacy Program

- Army Community Services (1965)
- AR 608-1
- Volunteer dependant
- FAP AR 608-18

# Army Family Advocacy Program Chain of Command


DEPARTMENT OF DEFENSE
HEADQUARTERS, DEPARTMENT OF THE ARMY
•ASSISTANT SECRETARY OF THE ARMY FOR MANPOWER AND RESERVE AFFAIRS
•ASSISTANT CHIEF OF STAFF FOR INSTALLATION MANAGEMENT
•USA COMMUNITY AND FAMILY SUPPORT CENTER
MAJOR COMMAND
INSTALLATION COMMANDER

# Family Advocacy Program Organization

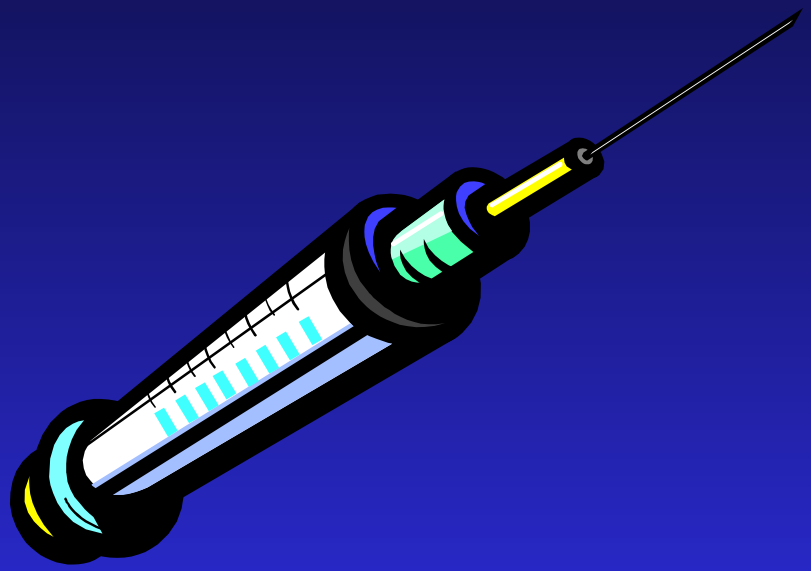


# FAP Objectives

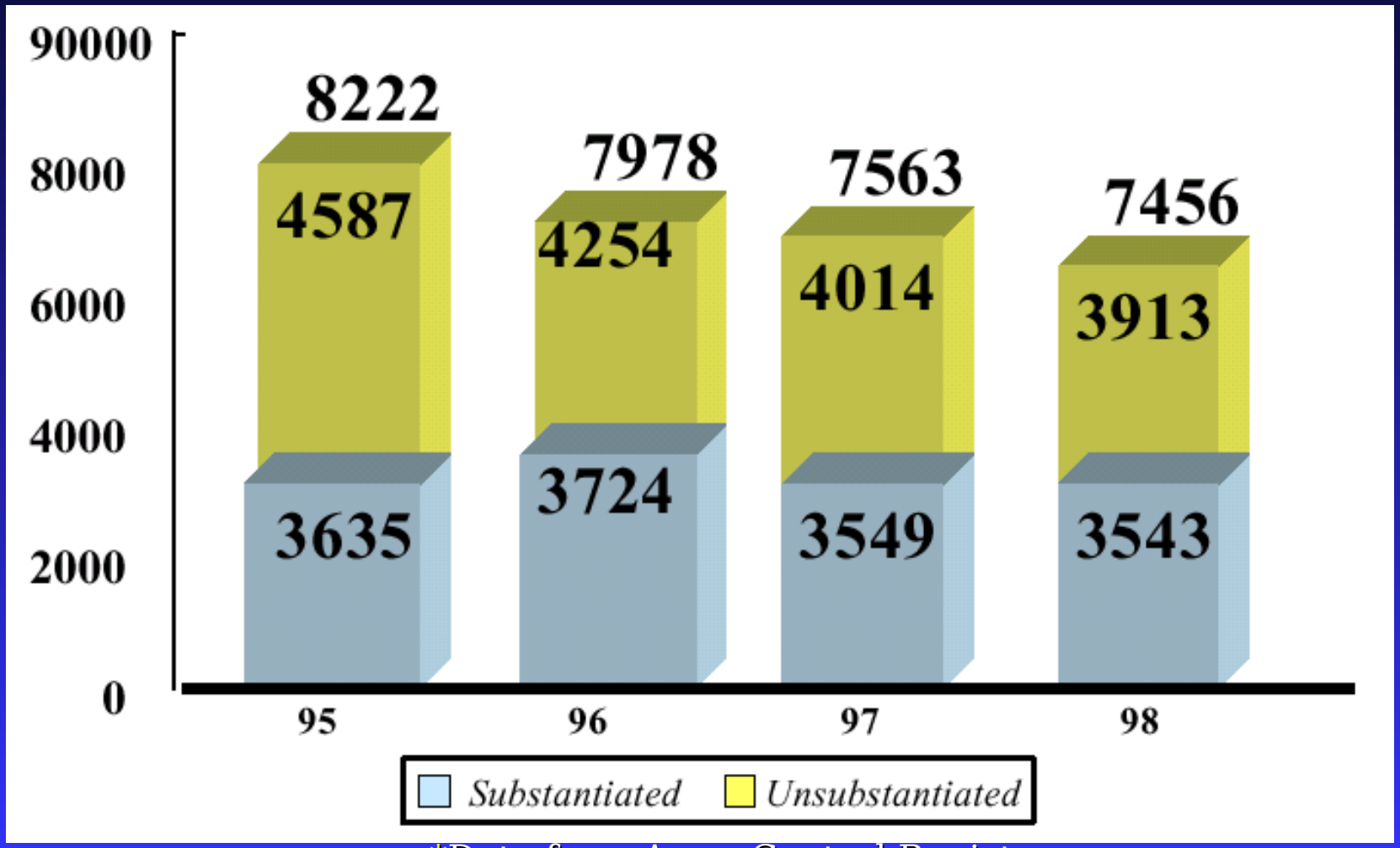
- Strengthen individuals, couples, families
- Prevent spouse/child abuse and neglect
- Encourage reporting of all abuse incidents
- Assessment/investigation of all cases
- Protect victims
- Tx for victims, abusers, family members
- Offender accountability

# FAP Objectives - Prevention

- Command
- Troop
- Parent
- Family/Marital
- Professional
- Safety
- General

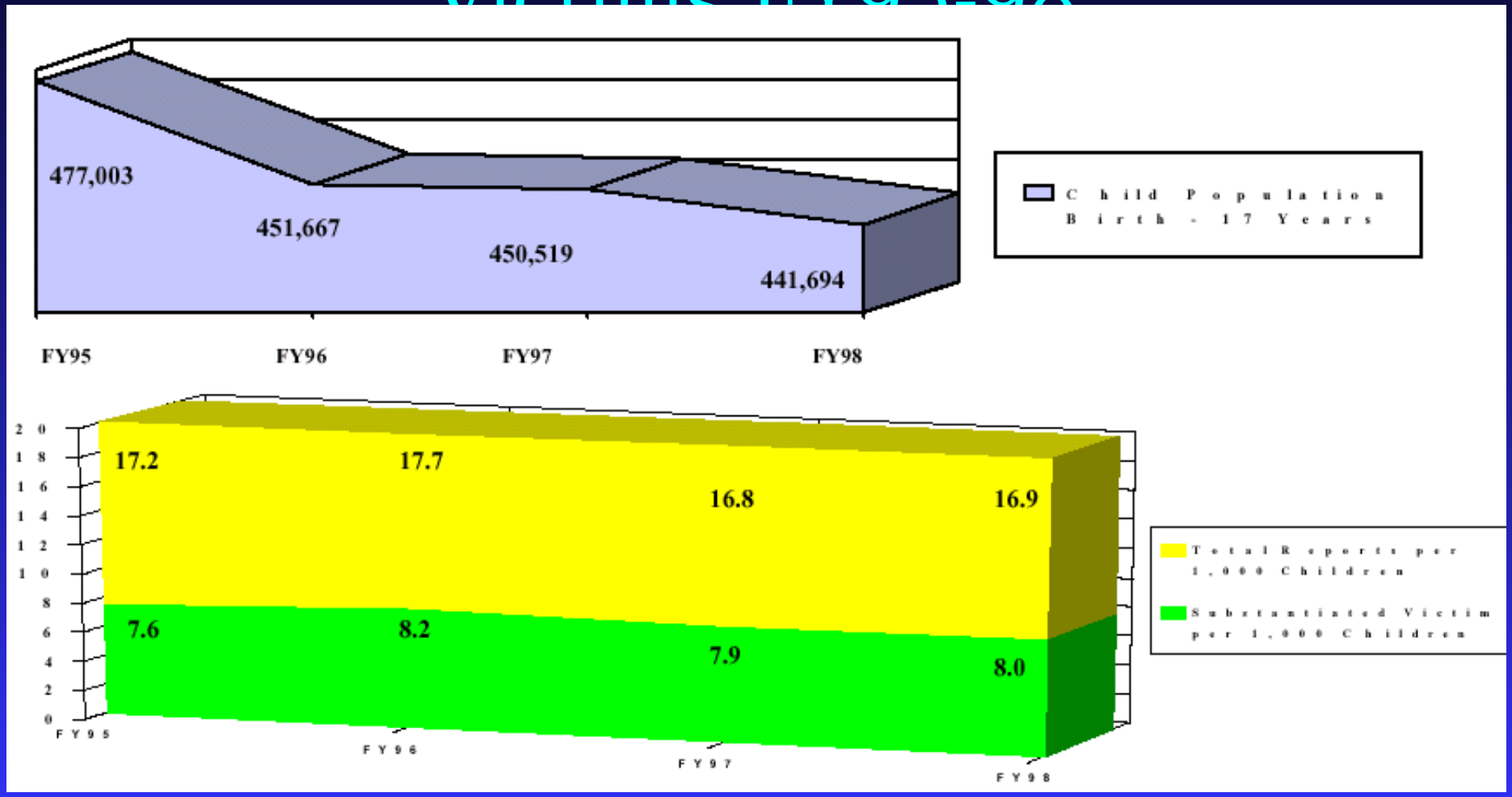


# U.S. Army Child Abuse Cases 1995-1998*



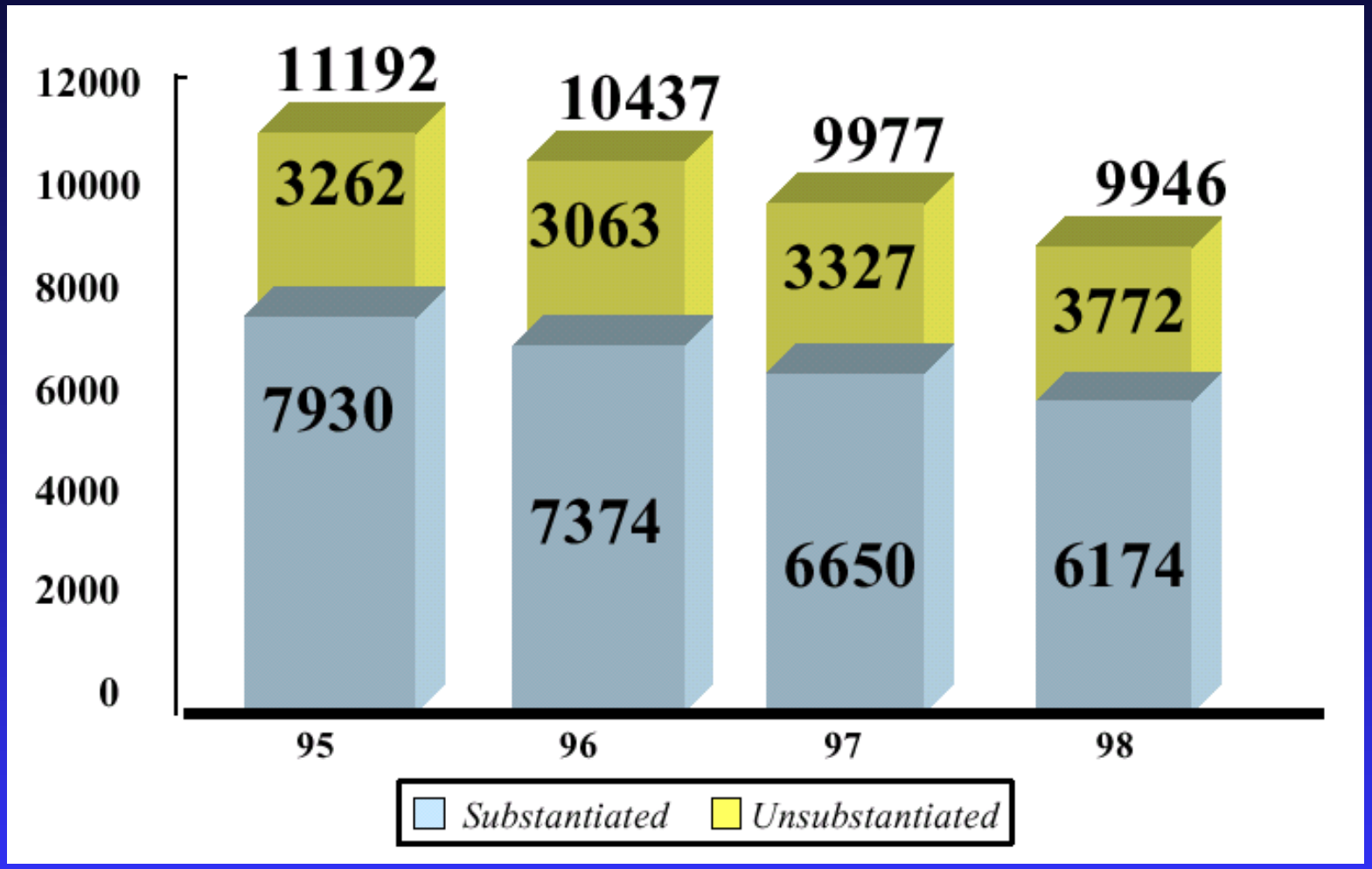

*Data from Army Central Registry

# Army Family Advocacy Program Child Abuse Rate Reports & Victims FY95-98*



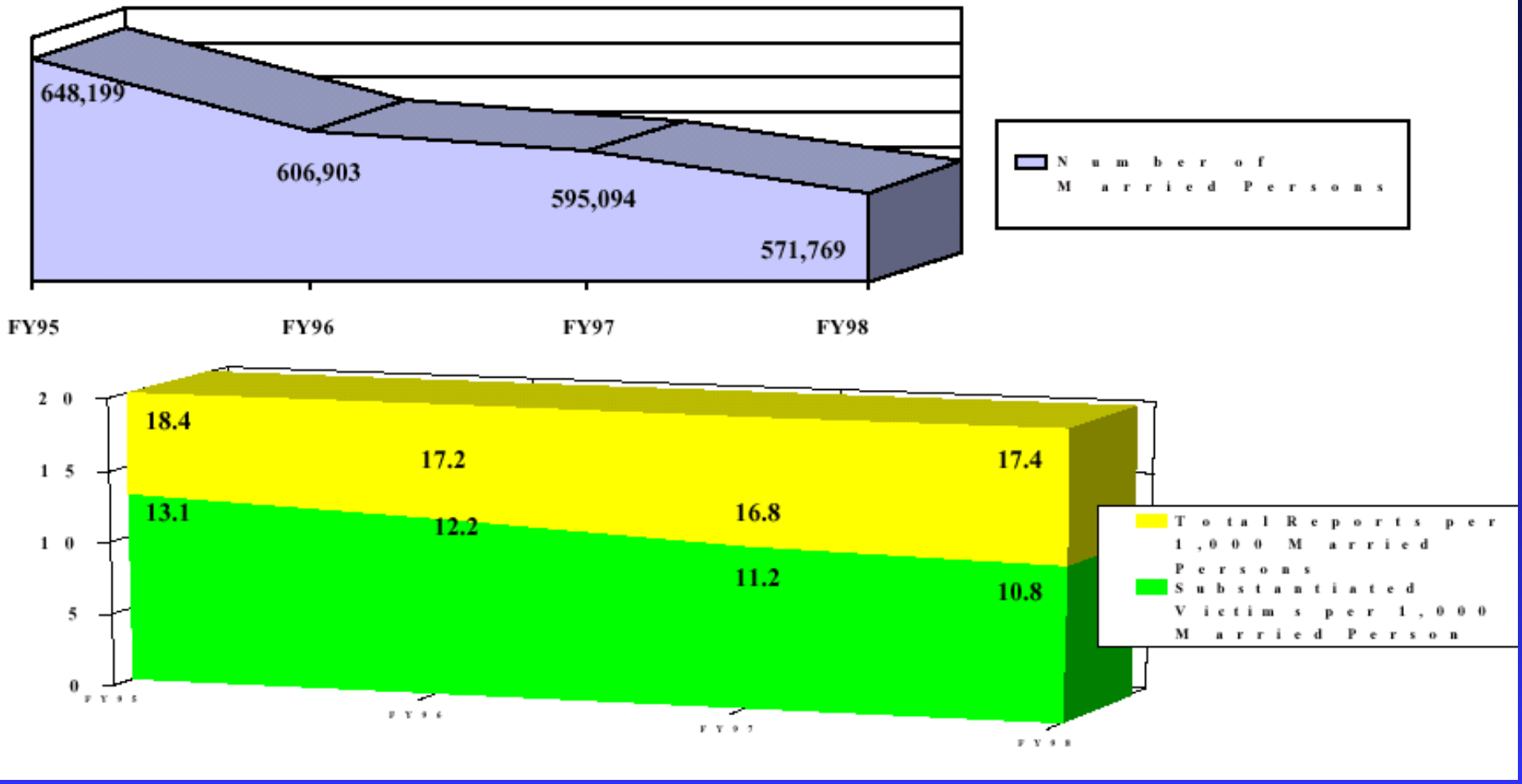

*Data from Army Central Registry

# U.S. Army Spouse Abuse Cases 1995-1998*




*Data from Army Central Registry

# Army Family Advocacy Program Spouse Abuse Rate Reports & Victims FY95-98*




*Data from Army Central Registry

# Case Review Committee

- “CRC” meets monthly at a minimum
- What does CRC do?
- Who is on CRC?
- Who votes on CRC?
- Where does mental health fit in?

# CRC –What it does

- Opens/closes cases
- Provides disposition
- Identifies treatment
- Coordinates actions
- Assesses problems/risks

# CRC – What it does

- Case management
- Advises Command
- Recommends administrative action
- Maintains civilian-military interface

# CRC Goals

- Promote healthy families
- Protect families
- Treat families
- Promote public awareness
- Coordinate interventions
- Unit readiness

# CRC Composition

- Voting members
- Non-voting members

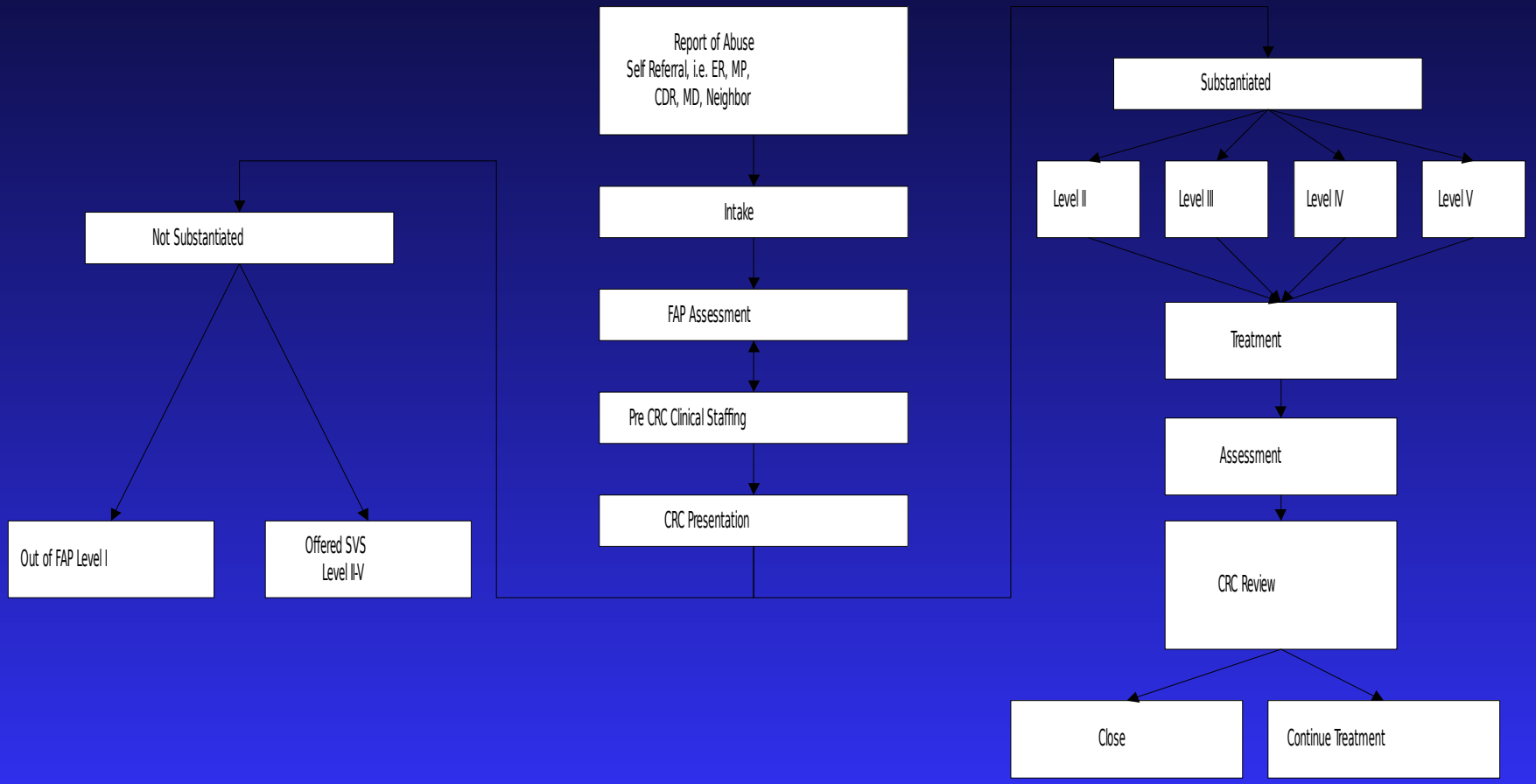
# Voting members

- Chairperson
- Pediatrician/Family Practice or other MD
- Chaplain
- CID
- ADAPCP
- PM
- SJA
- FAP manager
- Case manager (for his/her own cases)

# Non-Voting members

- Psychiatry/Psychology/other mental health
- DENTAC
- Community health nurse
- Child Development Services
- School, Youth Services when applicable
- Unit commanders of service member
- Child Protective Services when applicable

# FAP Assessment Flowchart



# Mental Health Interface

- Consultant to CRC
- Sometimes a clinician already involved with the case
  - referral source or treating person
- May be involved in mental health assessment of individual in case

# Psychiatrist's role

- Evaluation
- Diagnosis
- Treatment
  - Medications
  - Psychotherapy (Individual, Group)
  - Adult, Child, Family

# Qualifications

- Board Eligible/Certified Psychiatrist
- Regular meeting attendance
- No fellowship necessary, but important to know develpmental aspects (child)

# How to get involved

- Talk to the FAPM or SWS chief
- Volunteer as a consultant to CRC
- Attend FAST course (San Antonio, TX)
- Serve as Liaison between Psychiatry and FAP when pt entry issues are problematic
- Attend additional training when possible

# Questions?

# Websites of Interest

- https://csars.amedd.army.mil
- http://pasba.amedd.army.mil
- http://trol.redstone.acs.army.mil/acslink